

I. GENERAL

Contractor administration of the Program for Person with Disabilities (PFPWD) is subject to all applicable provisions of the TRICARE/CHAMPUS Policy Manual and 32 CFR 199.5.

A. Contractor Responsibilities

Contractors are responsible for providing information regarding the PFPWD to beneficiaries, sponsors, and providers by making available copies of contractor and *TRICARE Management Activity (TMA)* published literature, thorough the use of local information meetings within catchment areas that have a large number of PFPWD eligibles, and through provider representative visits.

B. PFPWD Benefit Eligibility

See the *Policy Manual, Chapter 9, Section 14.1.*

C. PFPWD Benefit Scope

See the *Policy Manual, Chapter 8, Section 3.1.*

D. PFPWD Benefit Adjudication

See the *Policy Manual, Chapter 11, Section 9.2* and *Section 9.3.* When a request for PFPWD benefit authorization is received, *TRICARE* contractor personnel shall process the request within 21 calendar days. Within this time period, contractor personnel shall:

1. Verify beneficiary *TRICARE* eligibility on DEERS;
2. Verify that the copy of the beneficiary's PFPWD qualifying condition letter is current, or assist the beneficiary in applying for such a letter;
3. Review the request to determine that each service or item requested meets benefit requirements (develop as necessary);
 - a. Issue a benefit authorization letter for allowable PFPWD benefits or;
 - b. Issue a benefit authorization denial letter offering appeal rights, if applicable.

E. PFPWD Providers

See the *Policy Manual, Chapter 11, Section 3.2.*

F. PFPWD Claim Processing

See the *Policy Manual, Chapter 13, Section 21.2.* Contractors shall maintain an automated authorization file or an automated system of flagging to ensure that PFPWD claims are processed consistent with the PFPWD benefit authorization. Each *TRICARE* Contractor shall post the authorization or set the flags within five days of issuance

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or receipt of the authorization. A valid PFPWD authorization is sufficient evidence that the services and items authorized are necessary and appropriate.

1. PFPWD claims must be submitted on the DD Form 2642, HCFA Form 1500, or the UB-92.

2. A claim for services or items which are allowable as a basic benefit that does not have a required PFPWD authorization attached, shall be processed as a basic program benefit claim.

3. A claim for services or items which are only allowable as PFPWD benefits, which does not have a required PFPWD authorization attached, shall be developed for a retrospective PFPWD benefits authorization determination.

4. Valid PFPWD claims are to be processed the same as basic program benefit claims except that:

a. The PFPWD unique cost-share shall be applied using the sponsor's DEERS pay grade in effect at the time the service or item was rendered.

b. The PFPWD has a government cost-share dollar limit which is different from basic program cost-share and is also different for sponsors with one, or more than one, PFPWD dependent.

G. Cost Sharing for Multiple Dependents Under PFPWD

1. If it is suspected that there may be multiple PFPWD-authorized dependents of one sponsor, the contractor shall:

a. Suspend processing PFPWD claims for all PFPWD beneficiaries of the sponsor when the amount for any one beneficiary exceeds the \$1,000 maximum benefit for the month; AND

b. Use internal authorization files, the information on the claim(s), or contact the sponsor or guardian to determine whether there was more than one dependent approved for PFPWD benefits during the month(s) covered by the claim(s).

c. When only one dependent was approved during the month(s), deny all allowable charges in excess of the \$1,000 benefit limit. The basis for denial shall be that the PFPWD maximum monthly benefit amount has been exceeded.

2. When it is determined that a sponsor has two or more PFPWD-eligible dependents both receiving care in a given month:

a. Process to payment any claims for which the allowable charges cumulatively amount to less than the \$1,000 benefit limit.

b. Suspend any claims, which, if paid, would be in excess of the \$1,000 benefit limit and, using controlled development, determine whether all claims for all PFPWD approved dependents have been received for the month. If not, advise the sponsor to submit any outstanding claims prior to the end of the suspense period. Claims received as the result of the initial development which, in turn, require development, may be suspended for an additional 35-day suspense period.

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(1) At the end of the suspense period each of the sponsor's dependents shall be ranked according to the total amount of PFPWD allowable charges for each month of service in the claim. The \$1,000 allowable amount benefit limit shall be waived for each dependent, except the dependent with the least amount of total allowable charges, for a given month.

(2) The dependent to whom the \$1,000 PFPWD benefit limit is assigned must be redetermined for each month in which any dependent in a sponsor group with multiple PFPWD-approved dependents, has an allowable amount, for the month, which exceeds the \$1,000 **TRICARE** share limit.

Example: Sponsor is a W-3, W-4, or an O-4.

Patient	Allowable for Feb.	Apply Toward \$1,000	Sponsor Pays	Gov't Pays
Joe	\$ 750	\$ 750	\$ 50 c/s	\$ 700
Ed	\$ 900	-	-	\$ 900
Sue	\$ 1,200	-	-	\$ 1,200

NOTE:

Should the contractor become aware that a PFPWD beneficiary is receiving care in a different contractor region, the contractor shall coordinate and adjust claims accordingly.

